being preyed upon, the eyes are commonly small—as in the whale and the elephant. In the latter, the eye is even smaller than it is in the horse, and scarcely larger than in the eagle.—*British Med. Journal.*

4. *The Structure of the Choroid Coat of the Eye, and more particularly the Character and Arrangement of the Pigmentary Matter.*—Mr. THOS. NUNNELEY read a paper on this subject, before the Physiological Section of the British Association, at its meeting in Leeds. The choroid coat is the dark tissue interposed between the delicate sentient retina and the hard, dense, sclerotic, and co-extensive with the latter. It begins at the entrance of the optic nerve by a round aperture, with a distinct edge, in close apposition with the nerve, but not organically connected with it, and passing forward as far as the junction of the sclerotic and cornea, where, as choroid proper, it terminates. It there comes in connection with the ciliary circle or muscle, the ciliary body and the iris. The choroid is essentially a vascular membrane, being made up of bloodvessels, colouring matter, and a modified white fibrous tissue. The choroid universally provided the pigmentum nigrum, and is of a deep bronze colour, approaching to black. The pigment was described as consisting of two distinct forms of cells—on the inner surface the choroid, of true hexagonal cells, and in the tissue, and on the posterior surface, of stellate cells. The use of these cells was to destroy the light as soon as it had acted on the retina; and they were the most perfect absorbers of light of any substance in nature that Mr. Nunneley knew of. From the account he gave of the arrangement of the pigment, it afforded what he considered a satisfactory anatomical explanation of an abnormal condition of the eye which had hitherto not been understood—*muscæ volitantes.* The figures of those motes he believed to resemble exactly portions of the choroid coat when teazed out; and they might be expected to appear and disappear with the varying condition of the vessels arising from disordered stomach, or the cerebral circulation, and be cured by whatever corrects those conditions; or the muscæ might result from different organic changes in the choroid coat, which are incapable of being removed.—*British Med. Journ.*, Oct. 9, 1858.

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5. *New Modes of Administering Iodine.*—Efforts have lately been made in France to administer iodine in a more efficacious manner than had hitherto been done. M. LERICHE, of Lyons, has published valuable articles in *L'Union Médicale*, wherein he endeavours to show that iodine, combined with vegetable substances, advantageously replaces cod-liver oil. He proposes a syrup made of the juice of water-cress and iodine, and also an iodine wine. The syrup has the advantage of not fermenting, and contains exactly one grain of iodine per ounce. The wine is composed thus: Bordeaux wine eight ounces; concentrated infusion of red roses about thirteen drachms; tincture of iodine one drachm and a half. Each ounce contains one grain of iodine. From one to six tablespoonfuls may be given daily, according to the indications and the age of patients. In the space of three years M. Leriche treated 38 scrofulous patients with the wine; 21 were perfectly cured after a treatment steadily pursued for some time; 8 did not improve at all; and 9 improved but slightly, either because the treatment was carried on imperfectly, or because it was left off too soon.

M. BOINET, on the other hand, well known by long-continued investigations respecting the use of iodine, read, on the 28th of September last, before the Academy of Medicine of Paris, a paper, in which he proposes to use iodine as an article of food. The author administers iodine as found in nature, viz., combined with those plants which contain the greatest quantity of the alkaloid. The latter being thus given in minute doses, in a continuous and almost imperceptible manner, yields most advantageous results. M. Boinet uses fuci, marine plants, cruciferæ, salts containing iodine, and some mineral waters holding iodine in solution. His excipients are ordinary bread, ginger-bread, cakes, biscuits, chocolate, wine, beer, syrups, &c., some being especially calculated for children. Trials were begun by M. Boinet as far back as 1849, upon subjects suffering very severely from the various well-known scrofulous symptoms, and most of them were cured after continuing the iodized food for several months. The author has not found that iodine administered for a long time produced a loss of flesh and atrophy of certain organs. Far from having these effects, the iodine, in his hands, has invigorated patients, and favoured the development of organs. Messrs. Chatin and Trousseau are to report upon the paper.

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6. *Therapeutic Properties of Sarsaparilla.*—Dr. A. M. **Adam**, in speaking of Prof. **Böcker**, of Bonn ("Medical Notes from the Continent," &c., in *Edinburgh Med. Journ.*, Oct. 1858), states his most recent pharmaco-dynamic experiments, "which, I believe, are as yet unpublished, have been made with sarsaparilla. He informed me that, after carefully performing ninety-eight experiments with this drug on healthy people, he found that, contrary to all our usually received opinions on the subject, it possesses neither diuretic nor diaphoretic properties. Another series of twenty-six experiments, on the persons of uncured syphilitic patients, gave exactly the same results. Böcker also satisfied himself that sarza does not increase the efficacy of the agents, such as iod. potass., etc., which are usually given along with it; and that the good results obtained by the administration of this salt, dissolved in decoction of sarza, are in no degree attributable to any virtue in the solvent fluid. I told Dr. Böcker that I remembered hearing Professor Syme, many years ago, express his opinion on the utter uselessness of so expensive a drug as sarza, remarking, in his own quaint, forcible style, that he believed an "infusion of hay" would be just as good, and a vast deal cheaper. He seemed amused, and said that he entirely agreed with Syme; that infusion of sarza had no greater effect on the system than so much common tea; and that we must regard it merely as a pleasant, but very expensive, vehicle for the administration of other medicines."

[Our own clinical observations have led us to the same conclusions as have been arrived at by the learned professor of Bonn, as to the utter absence of any therapeutic properties in the sarsaparilla.]

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7. *Formula for Jaser's Itch Ointment.*—Of all the ointments proposed for the treatment of scabies, one of the most efficacious, and at the same time least expensive for charitable institutions, is that of Jaser. Dr. **Delaharpe**, Physician to the Hospital at Lausanne, has used it for many years, with invariable success. The following is the formula:—

Flowers of sulphur, half an ounce; sulphate of zinc, one and a half drachms; powdered root of white hellebore, one drachm; soft soap, thirteen drachms; hog's lard, two ounces. M. Delaharpe has been for some years in the habit of adding half a drachm of essence of caraway. The latter addition has perceptibly increased the activity of the ointment, without rendering it more irritating. A pound of the preparation costs about two shillings. Each patient requires for cure, on an average, about eight ounces.

Would it be possible, asks Dr. Delaharpe, to diminish the number of substances entering into the composition of the ointment, without impairing its antipsoric properties? I fear not. The fat and the potash soap modify one another, and by increasing the proportion of soap, we should run the risk of having too irritating an ointment. I propose, however, to make some experiments on this point. The sulphate of zinc does not here act a corrosive part, as might be supposed, for it is completely decomposed by the potash of the soap; it thus serves to form a little sulphate of potash, and by degrees some sulphuret of zinc, by contact with the sulphur. The sulphuret of zinc may have an antipsoric action, at the same time that it contributes to diminish the itching and irritation of the skin, as zinc ointments in general do. A little hydro-sulphuric acid, which is disengaged from the sulphuret of zinc, may also favour the action of the ointment.

The powdered hellebore and essence of caraway are the most active antipsoric